

ISSUE SLIP STAPLE AREA (for additional cross references)

PORTION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		4/2	1/23/61
FORMALITY REVIEW	TZ	5C997	02-12-01
RESPONSE FORMALITY REVIEW	HA	852	03-06-01

INDEX OF CLAIMS

BEST AVAILABLE COPY

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) C Cancelled A Appeal
 + Restricted O Objected

Claim	Date
1	1/23/61
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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